

KNEE PAIN RELIEF REPORT

CLIENT DETAILS

CLIENT ID	SG:7982
TYPE OF PAIN	KNEE PAIN

SYMPTOMS (%) BEFORE THERAPY:

Title	Value
PAIN(%)	40
SWELLING(%)	45
STIFFNESS(%)	51
WARMTH AND REDNESS(%)	57
WEAKNESS OR INSTABILITY(%)	63
POPPING OR GRINDING SENSATION(%)	66
LIMITED RANGE OF MOTION(%)	72
PAIN WITH CERTAIN MOVEMENT(%)	78
TENDERNESS(%)	59
BEARING WEIGHT(%)	44

PAINETRICS ANALYZE:

Title	Value
SEVERITY(%)	56
TYPE OF BACKPAIN	

RELIEFTHERAPY ANALYZE:

Title	Value
THERAPY	Therapeutic Ultrasound
DURATION	2 sessions per week 6 weeks

SYMPTOMS (%) AFTER THERAPY:

Title	Value
PAIN BEFORE THERAPY (REDUCED %)	68
PAIN AFTER THERAPY (REDUCED %)	40
SWELLING (REDUCED %)	45
STIFFNESS (REDUCED %)	55
WARMTH AND REDNESS (REDUCED %)	78
WEAKNESS OR INSTABILITY (REDUCED %)	85
POPPING OR GRINDING SENSATION (REDUCED %)	65
LIMITED RANGE OF MOTION (REDUCED %)	58
PAIN WITH CERTAIN MOVEMENT (REDUCED %)	42
TENDERNESS (REDUCED %)	25
BEARING WEIGHT (REDUCED %)	65
OVERALL RELIEF PERCEPTION (%)	56

EFFECTIVENESS ANALYZE:

Title	Value
EFFECTIVENESS (%)	81